

COLLEGE STORE

Catering Request Form

FOR OFFICE USE ONLY

Quote Number: _____ Today's Date: _____ Date & Time of Catering: _____

Catering Location: _____ Set up Time: _____ Clean up Time: _____

Requestor: _____ Department: _____

Phone Number: _____ Email: _____

Please make sure this form is complete and signed by authorized personnel. Once this catering request form is completed please email or bring it to the college store.

Approval: _____
Vice President and/or
Authorized Designee _____ Date _____

For Catering: bookstore@piercecollege.edu

For Questions: College Store Supervisor: hogiky@piercecollege.edu ext. 3312
College Store Manager: vanca@piercecollege.edu ext.2854

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Quantity	Item Code	Description	Discount	Unit Price	Ext. Price

Payment Type:

Fund/Program: Account # _____ Credit Card Cash
G/L Account # _____
WBS/ Cost Center# _____

Subtotal: _____

Tax: _____

Delivery: _____

Set up/Clean up: _____

Total: _____

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Received By _____ Date _____